

Regional Service Council Minutes Region # 13

Meeting Date: April 21, 2006

Meeting Location: Greene County DCS/DFR

Council Members Present:

Stephanie Raventos, Owen County DCS Acting Director; Lindsey Smith, Monroe County DCS Director; William Walker, Regional Manager; Beverly Haynes, Greene County CASA Director; Cami Terry, Lawrence County DCS FCM II; Angie Baugh, Owen County Foster Parent; Debbie Dailey, Brown County Director.

Council Members Absent:

Judge David Johnson, Greene County Circuit Court; Judge Andrea McCord, Lawrence County Court; Judge David Welch, Monroe County Court; Cheri Slover, Greene County Acting Director

Others In Attendance:

Matt Ellis, DCS Consultant; Renee Rottet, Debra Corn Agency; Nancy Hughes, Family Solution; Heather Perkins, Greene County FCM II; Penny Pitcock, Dodson & Shively Associates

Meeting Minutes

Meeting Called to Order at: 10:00 a.m.

1. First Order of Business: Community Partnership

Region 13 has an immediate problem regarding Community Partnership. Two service agencies were invited to the Regional Service Council meeting to get questions on the table and answered.

Matt Ellis a DCS Consultant attended the meeting along with Penny Pitcock from Dodson & Shively, Assoc. to help service providers and the RSC members understand the Community Partnership process.

The intent of Community Partnership is basically to eliminate Voluntary Service Cases by providing early intervention services. DCS will no longer be involved with Voluntary Services as of Sept 1, 2006. There is a variety of services that can be purchased through these funds. It could be getting gravel, bug spraying, in-

home therapy or counseling, ect. Community Partners is to help eliminate problems that will keep families from being involved with DCS.

Referrals will come from County DCS Offices, Schools, or the community as a whole. People can seek help on their own through the Community Partnership.

A concern regarding the development in the program is getting the MSW. The project manager doesn't have to solely have that role. It does not have to be a master level it can be a BA with 2 years of experience. If a service agency would submit a proposal and there are individuals that would be used that don't meet the guidelines you would need to submit a waiver.

A board will need to be put together for the Community Partnership. There will be guidelines on of how to set up a board for the Community Partners. This is a work in progress.

Service providers may want to subcontract with other service agencies. In rural communities it is not feasible thatto have one provider will be able not only to provide all services but cover the Region as well.

The agency that takes over the Community Partnership would receive operational start up costs through the time frame of July 2006 – September 2006. The agency will be paid based on unit cost rather than a monthly payment. The agency will get dollar for dollar reimbursement instead of the monthly amount.

Discussed concerns of all the money being spent before the end of the first year.

Bill Walker informed them that M.B. Lippold is constantly trying to find more funding for the program and that if a person has Medicaid the person needs to be referred to Medicaid providers.

Discussion regarding Assessment Tools. Assessment Tool will would be chosen by DCS and it has not been decided yet. Everyone would need to use the same tool. There will be set guidelines. In some cases the guidelines might need to be relaxed since we are dealing with smaller population than in Indianapolis.

Questions on how receptive people would be if they thought Community Partners were tied in with DCS? It was suggested to make the family feel as if it was their decision. If you would see anything that looks like abuse or neglect then you would inform DCS, but you don't want to hold a hammer over them. The case plan Billing: The billing would come to the Director of the county DCS. It would be like the IV-B funding. It would be up to the service providers to stay in the area of the funding. It may create audit nightmares. If they bill once a month it would show the services that is being billed. Some services will show that it was covered by Medicaid. Any money that was not used at the start up can roll the left over money into services.

Questions on how receptive people would be if they thought Community Partners was tied in with DCS? It was suggested to make the family feel as it was their decision. If you would see anything that looks like abuse or neglect then you would inform DCS, but you don't want to hold a hammer over them. The goal is to set up all 3 goals and try to avoid DCS from coming in the home. If someone would refuse one of the services that would be a good issue to take to the advisory board due to the fact this would be voluntary and they don't have to do this.

The services provided would be strength based. People sometimes don't want to ask for help but if offered they might be willing to take help. Sometime just talking with the family that might help them. Sometime providers may have to leave the home and leave it up to the client to accept help and have them contact you as if it is their idea. This program is designed to help families and help families work together.

Matt Ellis and Penny Pitcock said that they would be available for any further questions that service providers might have. They are willing to help everyone understand Community Partnership.

Service Providers stated that they have a better understanding of Community Partnerships after having discussed all issues at this meeting.

Bill goes over the budget/tax levy handout with everyone present.

2. Closing of the meeting: Bill Walker encouraged service providers to submit proposals as soon as possible.

Next Meeting Date, Location and Time:

June 16, 2006 Greene County DFR/DCS Office 10:00 a.m. – 12:00 p.m.

Meeting Adjourned at: 11:45 p.m.